



Activities of the Health Law Center University of Pittsburgh

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IN THIS REPORT I should like to emphasize the reasons for the development and direction of the Health Law Center at the University of Pittsburgh, not simply to chronicle its history and accomplishments but to indicate why we are interested in working in health law.

The Health Law Center was established in 1958 as a part of the department of public health practice of the Graduate School of Public Health. It is an outgrowth of a research project in the legal aspects of the operation of hospitals which began at the Graduate School of Public Health in 1956 and culminated in 1959 with the publication of the Hospital Law Manual. The research problems encountered in preparation of the manual and the format it assumed on publication have greatly affected the center's subsequent development.

The Health Law Center performs several functions. It has responsibilities in the teaching programs of the university. It engages in research into the legal aspects of public health, medicine, nursing, hospitals, medical care, mental health and allied fields, and it provides community services. We have concerned ourselves primarily with the legal problems of health agencies and organizations, both governmental and nongovernmental. In addition, our interest has extended to the legal duties, powers, responsibilities, and liabilities of the personnel who operate such agencies and organizations. In short, the interest of the center has been in the legal aspects of health facilities and of the

persons who provide health services and train health personnel. Thus we have not conducted extensive research in any of the traditional areas of forensic medicine, such as the legal aspects of gunshot wounds or the problems of introducing medical testimony into court proceedings. Our emphasis has been on the organizational aspects of health.

Because of the complexity of the subject matter, the great bulk of the legal and other materials to be researched, and the great differences among jurisdictions, it has been necessary to build a permanent staff with growing experience in health law research. Eric Springer and Nathan Hershey, as associate directors, and I, as director, have been on the faculty of the Graduate School of Public Health since the beginning of the hospital law project in 1956. All of us hold faculty appointments in the Graduate School of Public Health and the School of Law and participate in the teaching programs of both schools. At present there are six attorneys on the staff of the Health Law Center.

Research Activities

It is necessary to discuss at some length our research in hospital law, because this research predated the Health Law Center and strongly affected both the beginning of the center and its direction and emphasis. It was the research necessary to produce the manual that interested us in the complicated and intriguing legal problems involved in administering health care in differing organizational frameworks.

The Hospital Law Manual is in its fourth year of publication. It is a 4-volume, looseleaf

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service of about 2,500 pages. Two volumes are specifically directed to the hospital attorney and two volumes to the hospital administrator. At present, more than 1,700 hospitals and their attorneys throughout the United States subscribe to the Hospital Law Manual. Among the subscribers are hospitals ranging from 50 to 1,000 beds, which include nonprofit, proprietary, osteopathic, State, public health service, armed forces, and mental hospitals. Four times a year subscribers receive supplements which range in size from 40 to 65 pages each. Thus the continuing publishing job on the manual requires the writing and editing of more than 250 printed pages per year.

The manual is a compilation and analysis of the laws, regulations, cases, and administrative rulings and opinions of the attorneys general affecting the operation of hospitals. It is divided into chapters which reflect legal problems confronting a hospital, for example, admission and discharge, consents to medical and surgical treatment, medical staff privileges, State and Federal taxation, pharmacy, labor problems, medical records, negligence, and hospital auxiliaries. Many chapters discuss the law on a State-by-State basis. The chapter and subchapter breakdown of the Hospital Law Manual is the same for both the attorney's and administrator's volumes so that the administrator and his attorney can compare material when discussing a legal problem. The manual is designed to provide the hospital administrator with the administrative and practical aspects of legal problems and to provide the hospital's attorney with sufficient specialized legal background so that he can advise the administrator competently.

The response the manual has evoked, and the continual use that our subscribers seem to give it, convinced us that we should concentrate on studies which would be of immediate practical help to people in the health field. At present, the yearly resubscription rate to the manual is approximately 85 percent.

With the publication of the Hospital Law Manual, our interest has turned to related subjects. In conjunction with the program in medical and hospital administration at the Graduate School of Public Health and the

American Association of Medical Colleges, we are engaged in a study of affiliation relationships between medical schools and teaching hospitals. This project dovetails with our interest in hospital law and provides us with experience in the administrative and legal aspects of medical education. This study has inevitably led to consideration of the problems of medical experimentation on human beings and of the problems inherent in the use of medical students, nursing students, interns, and residents in training and service roles in teaching hospitals.

Another spin-off of our experience and interest in hospital law has been an increasing interest in the legal aspects of nursing homes. For the past 6 months we have been studying the legal problems involved in affiliations between nursing homes and hospitals and the difficulties and pitfalls in drafting legal agreements between such institutions. General interest in the legal aspects of the operation of nursing homes and other long-term care facilities is increasing and is receiving more attention in the health community and in government. A quickening of community interest and the recognition of legal problems often seem to go hand in hand.

Other major research activities of the center can only be summarized. We are devoting time to the field of maternal and child health, specifically as it relates to school health laws. We are engaged in a study of the legal aspects of organizing State health departments and in the recodification of State health laws. We have compiled and digested for the Public Health Service the air pollution ordinances for cities of more than 200,000 population. We have also been increasing our experience, so far without any practical resulting product, in the fields of medical care and housing. With respect to housing, we have been particularly concerned with the overlapping of legal jurisdictions in the housing and health fields in a metropolitan area such as Allegheny County, which includes the city of Pittsburgh and many separate small municipalities. We are hopeful that participating in the recodification of the general ordinances of Pittsburgh during this year will enable us to give practical attention to this problem.

In all these research efforts, our idea has been to build up continuing competence that carries over into teaching and into public education and service so that as our competence increases we will affect future legal development of these fields. I must be frank in saying that in some instances, while we have gained experience and understanding of the legal problems of a field, we have not been able to turn this experience to any practical consequence. Perhaps it is un-academic to say this, but we have published only when we felt publication would result in the satisfaction of a need, when the publication itself was likely to be widely read, and when the publication format was conducive to use. Thus research in the legal aspects of nursing home care has been going on for 3 years without any discernible method of organizing and presenting this material in a meaningful and useful manner. With the widening increase of interest in nursing home law, we are now contemplating the publication of a book.

Teaching

Members of the Health Law Center staff participate each year in lectures in the beginning courses of public health practice in the Graduate School of Public Health. We also give 16 hours of instruction in hospital law in the course on medical and hospital administration. The textbook used in this course, "Student's Guide to Hospital Law," is published by the center and is also used in several other universities for instruction of hospital administration students. In addition, this year for the first time, the center will offer a 16-hour seminar on public health law. Members of the center staff lecture each year in various courses in the Medical School and the School of Nursing. In the School of Law, the Health Law Center offers each year a one-semester seminar in health law, and we participate as lecturers in other seminars and courses in the law school.

I do not wish to derogate the graduate teaching function of the center. I feel that we make a real contribution to the development of the students in the Graduate School of Public Health and instill in a group of the students of the law school some interest in the legal aspects of health. Because of the limited time

available in both the legal and public health curriculums, however, it seems to us necessary to concentrate much of our teaching efforts on continuing education in various forms. It should be stated bluntly that in continuing education the format and method of presentation are extremely important. Not only is the attention span short but retention is often shorter, especially when the information presented, however useful, is unrelated or a specific problem of the moment.

For 5 years we resisted the temptation to hold a hospital law institute at the University of Pittsburgh. In the spring of 1963, for the first time, we held a 2-day seminar limited to attorney subscribers to the Hospital Law Manual from the States of Pennsylvania, New York, New Jersey, and Ohio. In order to keep the institute small, registration was limited to 50 attorneys. The sessions of the institute were limited to four subjects: problems of medical staff privileges, formulary systems, consents, and specialists' agreements. Each registrant was required to submit, in advance, copies of medical staff regulations, consent forms, pharmacy arrangements, and medical specialists' agreements. These were analyzed by the center staff, and typical provisions were excerpted and put together in a 75-page workbook given to each participant of the institute. Formal presentation of each subject was followed by a 2-hour group session in which the portion of the workbook dealing with that subject was exhaustively discussed, and the strengths and weaknesses of various forms and procedures were hotly debated from a legal angle. Although this method of presentation required a considerable amount of time on the part of the center staff who acted as faculty for the institute, the results were extremely valuable for all participants, both students and faculty. On the whole, this experiment in continuing education was a complete success.

Community Services

By community service, I refer particularly to those activities of the center which are predominantly outside the school but do not include teaching.

Members of the center staff participate as

widely as possible in institutes in hospital, medical, and public health law. One such institute, sponsored by the Pennsylvania Department of Health, comprised 3 days of instruction in various aspects of public health law for members of the staff of the State department of health and of various local health departments.

An important aspect of community service is answering letters asking for various kinds of information. As the reputation of the center has grown as a repository for health law information, the number of inquiries from students, attorneys, hospital administrators, and people in health agencies has increased. About 200 inquiries a year are received and answered.

One of the most important activities of the Health Law Center is acting as a national clearinghouse for health law information. As the center continues to expand its activities, there is an inevitable growth of files containing health law material from all the States. These files are organized in the traditional manner containing regulations, articles, court decisions, commentaries, briefs, and other materials.

In addition, much of the center's recent activities have been devoted to the development of a computer file of health law. At present we have on magnetic tape all the statutes relating to health from New York, Ohio, Illinois, North Dakota, Washington, California, South Carolina, Florida, Maryland, and Arizona, as well as the complete statutes of the United States and of the States of Pennsylvania and New Jersey. These computer files are used to answer inquiries from State health departments and offices of attorneys general with respect to the prevalence in other jurisdictions of health legislation in which they may be interested.

The computer files also provide the raw material for drafting new legislation and regulations and recodifying the old. As time goes on, the computer files and the expertise produced thereby may well be the basis for the greatest contribution the center could make in health law; that is, the systematic organization and study of the materials of the law on a national, State, and local basis, gathered together in one place and available to all.